

**Division of Nutrition and Health Services  
Child and Adult Care Food Program  
FAMILY DAY CARE HOMES  
FOR APPROVING OFFICIALS ONLY**

**2008-2009  
ELIGIBILITY STANDARDS  
FOR  
FAMILY DAY CARE HOME MEALS**

<b>HOUSEHOLD SIZE</b>	<b>ANNUALLY</b>	<b>MONTHLY</b>	<b>WEEKLY</b>
1	\$19,240	\$1,604	\$370
2	\$25,900	\$2,159	\$499
3	\$32,560	\$2,714	\$627
4	\$39,220	\$3,269	\$755
5	\$45,880	\$3,824	\$883
6	\$52,540	\$4,379	\$1,011
7	\$59,200	\$4,934	\$1,139
8	\$65,860	\$5,489	\$1,268
For Each Additional Family Member Add	\$6,660	\$555	\$128

**CURRENT INCOME** means income (as defined on parent letter) received during the month prior to the application. If this income does not accurately reflect the household's annual rate, income should be based on projected annual household income.

**WEEKLY AND YEARLY** income figures are given for convenience of those districts using computerized approval. All hand calculations must be based on monthly income.

To be complete, an application **MUST** contain the following:

**FOOD STAMP/K-TAP/WIC HOUSEHOLDS**

1. Child's name and birth date
2. Food Stamp, K-Tap, WIC number of child

**ALL OTHER HOUSEHOLDS**

1. Child's name and birth date
2. Names of ALL household members
3. Social Security number for adult who signs application (if chosen for verification, family must provide social security number for each adult household member or indication that person does not have a social security number.
4. The amount of gross monthly income received by each household member, identified by source.
5. Signature of an adult household member.